

Calhoun County
Office of Senior Services
Minimum Service Standards



2015 Senior Services
Minimum
Service
Standards for RFP 128-14

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Calhoun County Office of Senior Services Minimum Service Standard

SERVICE NAME: ALL SERVICES

GENERAL REQUIREMENTS – All services and programs funded with Calhoun County Senior Millage funds must comply with the following general requirements.

- A. The service provider shall provide assurance that they will comply with all applicable Federal, State, and local laws and regulations.
- B. The service provider shall adhere to the definitions and minimum standards and requirements for all contracted services.
- C. The service provider shall comply with all reporting requirements dictated by Calhoun County.
- D. Recipient Eligibility Criteria
 - 1. Services shall be provided only to Calhoun County residents 60 years of age or older.
 - 2. Service providers shall maintain a written list of persons who seek service but cannot be served at that time. Such a list must include the date the service is first sought and the service being sought by geographic area within the County. The service provider must determine whether the person seeking service is likely to be eligible for the service requested before being placed on a waiting list.
 - 3. Recipients eligible to receive services through Federal, State, or other community resources shall be referred to those programs, and third party reimbursement sought before Senior Millage resources are used.
 - 4. It is expected that all residents in licensed nursing facilities will receive their primary benefits and services from those facilities and not utilize senior millage funds. This does not preclude or exclude mutual programs or special events that benefit the facility residents and senior millage.
 - 5. For services that have an income limitation requirement for eligibility, the income limitation is program specific. For a few specific services, recipients must be at or below 200% of the poverty level as published in the most recent Federal Register. (See Chart of Services at the end of this Section.)
 - 6. When demand exceeds program or financial capacity, substantial emphasis must be given to serving eligible persons with greatest social and/or economic need.



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E. Contributions and Cost-Sharing

No one may be denied services for failing to make a donation. All program recipients shall be encouraged to and offered a confidential and voluntary opportunity to contribute towards the costs of providing the services received. This can be at the time of service, such as meal programs and transportation, or via a mailed statement of services value each month. Waiver of this requirement for accepting donations may be approved in writing for some services by the County. 2. Except for program income, no paid or volunteer staff person of any service program may be allowed to solicit contributions from program recipients, offer for sale any type of merchandise or service, or seek to encourage the acceptance of any particular belief or philosophy.

3. The service provider shall have in place a written procedure for handling all donations or contributions, upon receipt, which includes, at a minimum:
 - a. Counting, recording, and signature of all receipts by two individuals at each service facility or service provider office. In the case of in-home services, Recipient donations must be collected in either a locked box, or sent by check through the U.S. Postal Service to a service facility or the program office for counting, recording, and signature of receipts;
 - b. Provisions for sealing, written acknowledgment and transporting of receipts to either deposit in a financial institution or secure storage until a deposit can be arranged; and,
 - c. Reconciliation of deposit receipts and collection records by someone other than the depositor or counter(s).
4. Specific programs, such as Hearing, Vision, PERS, Ramp Installs, Chore Services, and Community Supportive Services (aka care management), may have a cost-sharing provision for recipients with incomes above 150% poverty level. Cost-shared funds returned to the program will provide additional services to other seniors.

F. Confidentiality

1. The service provider shall have established procedures to protect the confidentiality of information about recipients collected in the conduct of its responsibilities. No information will be disclosed without prior informed consent of the recipient or his/her legal representative. Disclosure may be allowed by court order, or for program monitoring by the Calhoun County Office of Senior Service which is also bound to protect the confidentiality of client information. It is the responsibility of each service provider to determine if they are a covered entity with regard to HIPAA regulations.
2. All recipient information shall be maintained in controlled access files.



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G. Coordination, Publicity, Alternate Funding

1. Each program shall demonstrate working relationships with other community agencies to insure that recipients in need of services have access to such services.
2. The service provider shall publicize the service(s) to assure access to older persons which at a minimum shall include being easily identified in local telephone directories.
3. The service provider shall include language in all publicity which recognizes that funding was provided by the Calhoun County Senior Millage.
4. The service provider shall be prepared to bring to the attention of appropriate officials for follow-up, conditions, or circumstances which place the older person, or the household of the older person, in imminent danger.
5. The service provider shall be prepared to make arrangements for the availability of services to recipients in weather related emergencies, as appropriate.

H. Insurance

1. The service provider shall maintain the following insurances, if required by law:
 - a. Worker's compensation
 - b. Unemployment
 - c. Property and theft coverage (including employee theft)
 - d. Fidelity bonding (for persons handling cash)
 - e. No-fault vehicle insurance (for agency owned vehicles)
 - f. General liability and hazard insurance (including facilities coverage)
2. The following insurances are recommended, but not required, for additional agency protection:
 - a. Insurance to protect the program from claims against the program drivers and/or passengers
 - b. Errors and Omission insurance for board members and officers
 - c. Professional liability (both individual and corporate)
 - d. Malpractice
 - e. Special multi-peril

I. Volunteers

1. Service providers utilizing volunteers shall have written procedures governing recruiting, training, and supervision.
2. Volunteers shall receive a written position description, orientation training, and a yearly performance evaluation, as appropriate.



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J. Staffing/Staff Identification

1. Each service provider shall employ competent personnel sufficient to provide services pursuant to the contractual agreement and demonstrate an organizational structure including established lines of authority.
2. Each service provider shall insure that any staff person, paid or volunteer, who enters a participant's home shall display proper identification, either an agency picture identification card, or a Michigan driver's license and some other form of agency identification.

K. Training Participation

1. New service provider staff shall receive an orientation which includes an introduction to the program, the aging network, maintenance of records and files, the aging process and emergency procedures. Records identifying dates of training and topics covered are to be maintained in employee personnel files.
2. The service provider shall budget an adequate amount of funding to address its training needs.

L. Recipient Satisfaction/Complaint Resolution

1. The service provider shall have established procedures to assure recipients are able to express their opinion of services.
2. The service provider shall have written complaint resolution procedures, to be used by recipients, and an appeals procedure for persons determined to be ineligible for services or who have services terminated. Persons denied service and program recipients shall be notified of these procedures through posted written materials at locations where services are provided, or through verbal instructions, as appropriate. Such notice must advise recipients that complaints of discrimination may be filed with the County, U.S. Department of Health and Human Services, Office of Civil Rights, or the Michigan Department of Civil Rights.

M. Service Quality Review/Program Evaluation

1. Each service provider must employ a mechanism for obtaining and evaluating the views of service recipients about the quality of the services rendered.
2. Each program must develop and implement an appropriate objective evaluation process to determine the effectiveness of the program in achieving its desired outcomes.



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N. Civil Rights and Fair Employment Compliance

1. Service providers agree to abide by the provisions of the Elliott-Larsen Civil Rights Act, P.A. 1976, No. 453, as amended, being sections 37.2101 et seq. of the Michigan Compiled Laws, and the Michigan Persons with Disabilities Civil Rights Act, P.A. 1976, No. 220, as amended, being sections 37.1101 et seq. of the Michigan Compiled Laws.
2. Each service provider must clearly post signs at service provider offices and locations where services are provided in English, and other languages, as appropriate, indicating non-discrimination in hiring, employment practices, and provision of services.
3. Service providers that subcontract must include Civil Rights language as part of the terms and agreement of the subcontract.



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Income Limitations for Services			
	No Income Limits	May Require Cost- Share	200% of Poverty
as of 08.21.13			
HEALTH RELATED SERVICES			
Benefits Counseling	X		
Community Supportive Services			X
Congregate Meals	X		
Dental Services			X
Health Ins Plan for Uninsured Seniors/Hlth Assist Fund			X
Hearing Services			X
Home Delivered Meals	X		
Prescription Drug Access			X
Prescription Vouchers			X
Vision Services			X
Whole Person Wellness	X		
INDEPENDENCE QUALITY OF LIFE SERVICES			
Adult Day Care			X
Caregiver Respite Services	X		
Chore Services			X
Guardianship	Below \$500 in Assets		
Home Heating Assistance			X
Information & Assistance	X		
Legal Services			X
Minor Home Repair			X
Money Management			X
Personal Emergency Response System			X
Ramp Services: Portable and Permanent			X
Senior Center Programming	X		
Transportation	X		
Transportation Dispatch	X		



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SERVICE NAME: BENEFITS COUNSELING

DEFINITION: The benefits counseling program provides assistance to individuals in understanding their eligibility and applying for available health and prescription benefits through Medicare (e.g. Medicare Part D prescription plans), Medicaid, and any community based health and prescription programs (such as Rx vouchers, Community HealthCare Connections options, and PDAP). The service provider acts as the single point of entry for immediate needs and long-term solutions for prescription acquisition for the recipient and fosters close collaborative relationships with other service providers of complimentary services. These services are to be provided throughout the county with locally trained volunteers.

UNIT OF SERVICE: One unit equals one hour of service. Units of service will be limited to professional time with or on behalf of individual seniors or a group of seniors where professional consultation is being provided.

INCOME REQUIREMENT: No income requirement applies.

DESIRED OUTCOME: Seniors preserve their financial resources by accessing prescription and health insurance benefits for which they may qualify, and the development and support of community-based volunteers.

MINIMUM SERVICE STANDARD:

A. Recipient Eligibility Criteria – The recipient eligibility criteria contained in the “ALL SERVICES” standard shall apply.

B. Staffing/Supervision/Training

1. Staff and volunteers providing service shall have training and/or experience in how Medicare, Medicaid, and other community benefits programs work.
2. The staff and volunteers providing service shall have the desire and ability to work with seniors.
3. The staff and volunteers providing service shall have some basic knowledge of Social Security and how to obtain extra help for eligible seniors in paying for Medicare Part D costs.
4. The staff and volunteers providing service shall be trained to use available computerized tools provided on www.medicare.gov and www.socialsecurity.gov.
5. A qualified program coordinator shall be appointed and accessible to all staff and volunteers as needed.
6. It is expected that the service provider will be responsive to training requests from collaborative partners to facilitate offering this service at as many sites as possible throughout Calhoun County.



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SERVICE NAME: BENEFITS COUNSELING

7. Training services will not be limited to Medicare/Medicaid Assistance Program certification rules and procedures as far as training community-based volunteers.

C. Program Activities

1. Staff and/or volunteers will provide assistance with procurement of recipient benefits.
2. Staff and/or volunteers will review Explanation of Benefits for proper payment.
3. Staff and/or volunteers will verify income and assets in order to apply for benefits based on these factors (e.g. Social Security extra-help with Medicare Part D costs).
4. Referrals to other services, as needed, shall be provided to seniors.
5. The service provider must provide services at various locations around the County including regular, periodic coverage of rural townships.
 - a. Regular scheduled times for service delivery must be established at appropriate locations in Battle Creek, Marshall, and Albion at least once per month and more frequently during the Medicare open enrollment period from October 15th through December 7th of each year.
 - b. Regular scheduled times for service delivery must be established at rural township locations in at least three locations other than the sites established in 5.a. above.
 - c. In periods of high demand for services, community volunteers trained in Part D enrollment assistance may be trained and available to rural residents without requiring full certification in all MMAP services.



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SERVICE NAME: CHORE SERVICE ASSISTANCE

DEFINITION: Chore Services Assistance is designed to help seniors with non-continuous household maintenance tasks intended to increase the safety of the individual(s) living at the residence.

UNIT OF SERVICE: One unit equals one household receiving up to one hour of on-site maintenance service or task repairs.

INCOME REQUIREMENT: Recipients must be at or below 200% of the poverty level as published in the most recent Federal Register.

DESIRED OUTCOME: Seniors will maintain their residence at a level that provides them a safe and secure environment free from obstacles, safety hazards, and troublesome maintenance tasks.

MINIMUM SERVICE STANDARD:

A. Client Eligibility – In addition to the recipient eligibility criteria contained in the “ALL SERVICES” standard, each program shall have written eligibility criteria which will include at a minimum:

1. The participant must be the head of household or spouse of head of household to receive assistance.
2. The maximum amount of assistance allowed per household is \$250 per calendar year, unless household cost-sharing occurs. This amount may be accessed on more than one occasion throughout the year and is not intended as one time assistance only but as a cumulative amount allowable over a calendar year.

B. Service Delivery

1. Allowable non-continuous maintenance tasks are limited to the following:
 - a. Replacing fuses, light bulbs, electrical plugs, and frayed cords
 - b. Replacing door locks and window catches
 - c. Replacing/Repairing pipes
 - d. Replacing faucet washers and faucets
 - e. Installing safety equipment
 - f. Installing screens and storm windows
 - g. Installing weather stripping around doors
 - h. Caulking windows
 - i. Repairing furniture
 - j. Installing window shades and curtain rods
 - k. Cleaning appliances
 - l. Cleaning and securing carpets and rugs
 - m. Washing walls and windows, scrubbing floors



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SERVICE NAME: CHORE SERVICE ASSISTANCE

- n. Cleaning attics and basement to remove fire and health hazards
 - o. Pest control (only authorized by appropriately licensed suppliers)
 - p. Grass cutting and leaf raking
 - q. Clearing walkways of ice, snow and leaves
 - r. Trimming overhanging tree branches
2. Non-allowable maintenance tasks include:
- a. Contact with or removal of lead-based paints
 - b. Contact with or removal of asbestos-lined or covered items
 - c. Construction or removal of ramps used for wheelchair access
3. Each service provider shall develop working relationships with weatherization, minor home repair, and housing assistance service providers, as available, in Calhoun County.
4. Each service provider shall maintain a record of homes repaired including dates, tasks performed, materials used, and costs.
5. The service provider shall utilize a written agreement with the owner of each home to be repaired which includes at a minimum:
- a. A statement that the home is occupied and is the permanent residence of the recipient.
 - b. Specifications of the repairs to be made by the service provider are to be provided.
 - c. Funds awarded for minor home repair service may be used for labor costs and to purchase materials and tools used to complete the maintenance repair tasks to prevent or remedy a sub-standard condition or safety hazard.
 - d. Funds may also be used to pay contractors, salaries and other normal costs associated with administering the program.

C. Verification of Work

1. The service provider shall utilize a written agreement with the owner of each home to be repaired which includes at a minimum:
- a. A statement that the home is occupied and is the permanent residence of the recipient.
 - b. Specifications of the repairs to be made by the service provider are to be prepared.
2. Each service provider shall utilize a job completion procedure which includes:
- a. Verification that the work is complete and correct.
 - b. Verification by a local building inspector(s) that the work satisfies building codes, if required by local code.
 - c. Acknowledgment by the recipient that the work is acceptable, within ten days of completion.
3. Each service provider shall maintain a record of homes repaired including dates, tasks performed, materials used, and costs.



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SERVICE NAME: COMMUNITY CARE OPTIONS

DEFINITION: The Community Care Options will provide limited services for frail seniors who are at risk of decline if their service needs are not met but are not so frail as to require care management or nursing home placement.

UNIT OF SERVICE: One unit of service equals the assessment, ongoing care assistance for one individual for one month, and the cost of purchasing services for community care options recipients.

INCOME REQUIREMENT: Recipients must be at or below 200% of the poverty level as published in the most recent Federal Register. Individuals above that income level may receive services by cost-sharing at 50% of their total program services.

DESIRED OUTCOME: Using a person-centered approach, the primary outcome is to focus a few critical less-intensive services that may help seniors remain safe, healthy, and provide a level of dignity by preventing further decline in their health and welfare.

MINIMUM SERVICE STANDARD:

A. Recipient Eligibility Criteria – In addition to recipient eligibility criteria contained in the “ALL SERVICES” standard, each program shall have a written eligibility criteria that includes, at a minimum, the following:

1. Recipients must be unable to perform **one or more activities of daily living (ADLs) without assistance**. Activities of daily living are limited to the following:
 - a. Bed mobility
 - b. Transfers
 - c. Toilet use
 - d. Eating
 - e. Dressing
 - f. Personal hygiene
 - g. Bathing
 - h. Ambulation
2. Types of services offered include:
 - a. Homemaking services
 - b. Home safety assessment
 - c. Meal preparation
 - d. Shopping
 - e. Bathing supports
 - f. Referrals to other resources that support home maintenance and repair



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Minimum Service Standard

SERVICE NAME: COMMUNITY CARE OPTIONS

B. Intake and Assessment

1. Intake – Each care management program must have uniform intake procedures and maintain consistent recipient records. Intake may be conducted over the telephone and should include at a minimum:
 - a. Name, address, and telephone number of recipient
 - b. Name and telephone number of referral source (if applicable)
 - c. Date of birth
 - d. Primary physician's name address, and telephone number
 - e. Name, address, and telephone number of person, other than spouse or relative with whom individual resides, to contact in case of emergency
 - f. Diagnosed medical problem(s) or handicaps
 - g. Perceived activities of daily living for which assistance is requested as expressed by individual and/or their formal or informal support
2. Assessment – A comprehensive individual assessment of need will be performed by contacting the Region 3B AAA Information and Assistance Specialist. The intake assessment instrument should be designed to obtain, at a minimum, the information listed below.
 - a. In addition to the information collected during intake, the assessment should obtain the following basic information: Place of birth, gender (optional), marital status (optional), race and/or ethnicity (optional), living arrangements, condition of environment, previous occupation, special interests, hobbies, and religious information (optional).
 - b. Functional status including vision, hearing, speech, oral status (condition of teeth, gums, mouth, and tongue), prostheses, psychosocial functioning, limitations in activities of daily living, eating patterns (diet history), prescriptions, medications, and other physician orders
 - c. A series of questions related to needs are used to determine if the services available under the program could be beneficial. A frailty determination is made whether the individual would be better served in the AAA Care Management service or MI Choice Waiver. Functional eligibility for these referral programs is frailty to the extent that would require nursing home care.
 - d. Recipients are offered a choice of available services based on their perceived need or wishes, as much as possible keeping health and safety requirements in mind. Recipient responsibilities for utilizing and benefiting from the services will be reviewed.
3. Each recipient' eligibility is to be redetermined every 180 days for active maintenance cases, or as needed. The Program Coordinator will mail a survey and service summary to the participants quarterly.



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SERVICE NAME: COMMUNITY CARE OPTIONS

C. Staffing/Supervision/Training – Intake staff must have adequate education, training, and experience to perform related intake functions. The Program Coordinator will perform quality control functions to determine that services are delivered as scheduled and arranged for under the contract.

D. Service Plans and Records

1. A service plan shall include the statement of the recipient's needs; the goals and objectives for meeting the identified needs; description and approaches used to address the needs; identification of the services to be arranged or purchased; and evidence of person-centered planning.
2. Intake assessments and case notes should reflect person-centered planning.

E. Purchase of Supportive Services

1. The service provider will be required to develop and monitor a purchase of service system (POS) that is designed to meet the needs of frail recipients. Service providers shall receive reimbursement for the cost of purchasing services for recipients.
2. Each service provider shall establish linkages with agencies providing long-term care support services within the program area that adequately meets the need of program recipients.
3. The service provider must ensure that all POS vendors follow the minimum standards for the services they are providing utilizing Senior Millage funds. The service provider must develop a comprehensive monitoring program of its POS vendors that insures that vendors are adhering to the minimum service standards.
4. Recipients may receive additional services as part of their service plan including those that support Instrumental Activities of Daily Living (IADLs). However, these services should be secondary services and not the primary services identified as needed by the recipient.



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SERVICE NAME: PERSONAL EMERGENCY RESPONSE SYSTEMS

DEFINITION: Personal Emergency Response System (PERS) provides the devices to provide communication, monitoring, and triage of patient contacts through the system. Hardware includes the “help” button (either pendant or wristband) and the communicator attached to the phone. Monitoring is done by contract with an emergency response provider who has contact with local emergency response systems.

UNIT OF SERVICE: One unit equals one month of monitoring a client and each occurrence of equipment installation.

INCOME REQUIREMENT: Recipients must be at or below 200% of the poverty level as published in the most recent Federal Register.

DESIRED OUTCOME: Seniors will be safe in their own homes and have access to emergency services that increase their feeling of security.

MINIMUM SERVICE STANDARD:

A. Recipient Eligibility Criteria – In addition to the recipient eligibility criteria under the “ALL SERVICES” standard, the following shall apply:

1. Recipients must be oriented and in possession of faculties to absorb training in the equipment, and be able to operate the button appropriately.
2. A redetermination of eligibility and ability to use equipment must be completed and verified semi-annually, and may be completed concurrently with a monthly equipment check.

B. Intake and Assessment – The following information shall be gathered as part of a standardized intake document:

1. Name, address and telephone
2. Date of birth
3. Gender (Optional)
4. Income verification
5. Insurance Information, Medicare Card, other Insurance Card
6. Responder identification and contact information

C. Service Delivery Standards– Equipment provided must be the least costly alternative that is appropriate for individual needs. The cost of additional services capabilities or add-ons are the recipient’s obligation.

1. Equipment used must be approved by the Federal Communication Commission and must meet UL* safety standards specification for Home Health Signaling Equipment.



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SERVICE NAME: PERSONAL EMERGENCY RESPONSE SYSTEMS

2. Response center must be staffed 24 hours/day, 365 days/year with trained personnel and will provide accommodations for persons with limited English proficiency.
3. Response center must maintain the monitoring capacity to respond to all incoming emergency signals.
4. Response center must be able to accept multiple signals simultaneously. Calls must not be disconnected for call-back or put in a first call, first serve basis.
5. Provider will furnish each responder with written instructions and provide training as appropriate.
6. Provider will verify responder and contact names semi-annually to assure current and continued participation.
7. Provider will assure at least monthly testing of the PERS unit to assure continued functioning.
8. Provider will furnish ongoing assistance, as necessary, to evaluate and adjust the PERS instrument or to instruct clients and caregivers in the use of the devices, as well as to provide for performance checks.
9. Provider will maintain individual client records that include the following:
 - a. Service order.
 - b. Record of service delivery, including documentation of delivery and installation of equipment, client/caregiver orientation, and monthly testing.
 - c. List of emergency responders.
 - d. Case log documenting client and responder contacts.



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SERVICE NAME: PRESCRIPTION DRUG ACCESS PROGRAM (PDAP)

DEFINITION: The Prescription Drug Access Program (PDAP) provides access to free and low-cost medications for individuals at low levels of income through the handling of the administrative process and assisting recipients to complete pharmaceutical applications.

UNIT OF SERVICE: One unit of service equals one completed pharmaceutical application.

INCOME REQUIREMENT: Recipients must be at or below 200% of the poverty level as published in the most recent Federal Register. Cost-sharing or community volunteer activity is encouraged in support of the service.

DESIRED OUTCOME: Beneficiaries of the Prescription Drug Access Program will be better able to maintain their independence as they better manage their chronic diseases through reliable access to needed medications. As diseases are better managed, health and quality of life improve, supporting the seniors' efforts to remain independent.

MINIMUM SERVICE STANDARDS:

A. Recipient Eligibility Criteria – In addition to recipient eligibility criteria contained in the “ALL SERVICES” standard, each service provider shall have written eligibility criteria which will include at a minimum:

1. Assistance may be provided to otherwise ineligible seniors under one of the following circumstances:
 - a. If the recipient's income is above the maximum income level of 200% of the Federal Poverty Level, he/she will be offered the opportunity to access the needed medication through the Prescription Outreach program, which offers medications in a 90-day supply for a low co-payment.
 - b. If the recipient has Medicare Part D or private insurance that does not cover (excludes) the needed medication completely, the recipient will be offered the opportunity to apply for the medication through the pharmaceutical company.

B. Recipient Intake and Records

1. Each recipient seeking assistance shall complete the intake process, which includes collecting the following basic information:
 - a. Name, address, and phone number
 - b. Gender (optional)
 - c. Age and date of birth
 - d. Allergies and medications
 - e. Diagnosis
 - f. Number in household



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SERVICE NAME: PRESCRIPTION DRUG ACCESS PROGRAM (PDAP)

- g. Marital status (optional)
 - h. Income and asset information
 - i. Insurance information
 - j. Primary care physician
2. The PDAP program will maintain a complete record for each recipient, including:
- a. The intake form
 - b. Proof of income, assets, and tax filings
 - c. Proof of identity by photo ID and social security card
 - d. Patient consent and release form
 - e. Medication list from physician
 - f. Certification of no tax filing, if applicable
 - g. Applicable notes



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SERVICE NAME: SENIOR CENTER OPERATIONS AND SUPPORTS

DEFINITION: Provision of support for the operation of a senior center. A senior center is defined as a community facility where older persons can come together for services and activities which enhance their dignity, support their independence and encourage their involvement in and with the community.

UNIT OF SERVICE: One unit of service equals one hour of senior center operation.

INCOME REQUIREMENT: No income or residency requirements shall apply, other than out-of-county residents may be asked to pay a higher membership fee

DESIRED OUTCOME: Seniors have access to services and programs that enhance their dignity, develop their health and well-being, support their independence, and encourage their involvement with and support for each other in the community.

MINIMUM SERVICE STANDARD:

A. Recipient Eligibility Criteria – The recipient eligibility criteria contained in the “ALL SERVICES” standard shall apply.

B. Minimum Standards:

1. Each senior center shall be certified as an accessible facility. Accessibility is defined as the ability of a person with a disability to enter the facility, use the restroom and receive services that is at least equal in quality to that provided to able-bodied participants.
2. Each service provider shall strive to adhere to the Principles for the Operation of Senior Centers as established by the National Institute of Senior Centers.
3. Each senior center shall be a meal site for a congregate nutrition program provided by County Senior Millage and/or the Region 3B Area Agency on Aging. This meal service may be managed by the center or by a separately contracted service.
4. The service provider shall first have in place:
 - a. A Steering Committee or Board vested with by-laws and legal authority to speak on behalf and contract for services of the Senior Center
 - b. The County Board of Commissioners shall appoint a representative of the Senior Millage Allocation Committee to sit on the senior center board as an ex-officio member.
 - c. A development or organizational plan outlining fiscal management and strategy for service delivery
 - d. Each senior center shall provide an opportunity for center participants to have input regarding the governance of the center at its board meetings as well as in daily operations.
5. Where a service provider supports a senior center director position, the person



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- occupying the position shall have the authority to perform administrative and review functions of the senior center; for a senior center program coordinator or specialist position, the person occupying this position shall be involved in the development and operation of programs at any given time within the center
6. Each senior center shall document that appropriate preparation has taken place for procedures to be followed in case of an emergency including:
 - a. An annual fire drill
 - b. Posting and training of staff and regular volunteers on procedures to be followed in the event of severe weather or a natural disaster
 - c. Posting and training of staff and regular volunteers on procedures to be followed in the event of a medical emergency
 7. Each senior center shall secure its own constituency in the community it is located, for the purpose of local support, financial stability, and developing local leadership through volunteer development.
 8. Each senior center shall provide directly or make arrangements for the provision of the following services:
 - a. Outreach
 - b. Information and assistance, including Medicare & Medicaid Assistance Program services
 - c. Socialization/recreation, fitness and wellness opportunities
 - d. Education
 - e. Volunteer opportunities
 9. Allowable senior center operational costs may include:
 - a. Rent
 - b. Utilities, including internet access
 - c. Communications
 - d. Insurance
 - e. Custodial services
 - f. Supplies
 - g. Staffing support
 - h. Training